



17169 U.S.PTO
030204

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

U.S. PATENT APPLICATION SERIAL NO. Unknown
FILING DATE Filed Herewith
INVENTORS John Avi Roop et al.
ASSIGNEE St. Jude Medical Puerto Rico B.V.
GROUP ART UNIT Unknown
EXAMINER Unknown
ATTORNEY'S DOCKET NO. 47563.0006
TITLE "Three-Needle Closure Device"

TRANSMITTAL LETTER AND CERTIFICATE OF MAILING

To: Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

From: L. Grant Foster
HOLLAND & HART LLP
555 - 17th Street, Suite 3200
P.O. Box 8749
Denver, Colorado 80201
Telephone: (801) 595-7830
Facsimile: (801) 364-9124

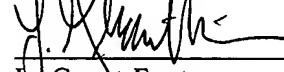
22782 U.S.PTO
10/791097
030204

Enclosed are the items listed below submitted regarding the matter identified above:

1. Transmittal Letter with Certificate of Express Mailing included
2. PTO Return Postcard Receipt
3. Patent Application (19 Pages, including Specification, 18 Claims, Abstract, and 10 Sheets of Drawings (Figs. 1-17))
4. Declaration of Joint Inventors for Patent Application
5. Assignment (with Recordation Form Cover Sheet)
6. Fee Calculation Sheet
7. Check for \$896.00 (\$770.00 Basic Filing Fee, \$86.00 Extra Claims, \$40.00 Assignment Recordation Fee)
8. Notice re Correspondence

Deposit Account Authorization - The Commissioner is hereby authorized to charge payment of any applicable fees to Deposit Account No. 08-2623.

Date: 2 March 2004


L. Grant Foster
Reg. No. 33,236

CERTIFICATE OF MAILING

I hereby certify the items listed above as enclosed are being deposited with the U.S. Postal Service as either first class mail or Express Mail, if the blank for Express Mail No. is completed below, in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below indicated date.

Express Mail No. EV 357960034 US

Date: 2 March 2004

Signature: Kathy Case
Name: Kathy Case



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APPLICANT'S CALCULATION OF TOTAL FEES DUE

| FEE TYPES | | | | | Amount (\$) | | |
|--|---|----------------------------|--|--|-----------------|------------------|-------|
| BASIC FEE (\$770/385) | | | | | \$ 770.00 | | |
| CLAIMS FEES | Number of Claims Remaining After Any Amendments | Minus the Larger | | Equals | Times Rate (\$) | | |
| | | Number Allowed in Base Fee | Number of Claims For Which Fees Have Been Paid | Excess Claims For Which Fees Are Now Due | Large Entity | Small Entity | |
| Total Claims | 18 | 20 | 0 | 0 | 18.00 | 9.00 | 0.00 |
| Indep. Claims | 4 | 3 | 0 | 1 | 86.00 | 43.00 | 86.00 |
| EXTENSION PETITION/FEES (\$) Applicant hereby petitions for an extension of time for response under 37 CFR 1.136(a) as indicated or as necessary to maintain the pendency of this application. | | | | One month | 110.00 | 55.00 | |
| | | | | Two months | 420.00 | 210.00 | |
| | | | | Three months | 950.00 | 475.00 | |
| | | | | Four months | 1,480.00 | 740.00 | |
| | | | | Five months | 2,010.00 | 1,005.00 | |
| ANY OTHER FEES | | | | | | | |
| Assignment Recordation | | | | | | 40.00 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| TOTAL FEES OWED | | | | | | \$ 896.00 | |

Deposit Account Authorization - The Commissioner is hereby authorized to charge any necessary payments or credit any applicable fees to Deposit Account No. 08-2623.

A check for the \$896.00 filing fee is enclosed.

Date: 7 MARCH 2004

By 
Grant Foster
Registration No. 33,236

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Please send all correspondence to:

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Please note that this mailing address corresponds to HOLLAND & HART's main office in Denver. All documents from the U.S. Patent and Trademark Office should be sent to the Denver office for docketing purposes. The undersigned attorney can be contacted directly at his Salt Lake City office at the telephone number and facsimile number specified above.

Date: 2 MARCH 2004

By: 
L. Grant Foster
Reg. No. 33,236